

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Safeway Inc. Political Action Committee (Safeway PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Perkins, James, , Mr.,**

Mailing Address 3343 S Donnington Place

City  
Eagle

State  
ID

Zip Code  
83616-7074

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Safeway Inc.

Occupation (for Individual)  
President Retail - Acme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : PR887760415057**

Amount of Each Receipt this Period

375.00

☐ Memo Item

P/R Deduction (\$75.00 Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Goulart, Michael, , Mr.,**

Mailing Address 17 School St.

City  
Fairhaven

State  
MA

Zip Code  
02719-3220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Safeway Inc.

Occupation (for Individual)  
Mgr District

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : PR887804815057**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$10.00 Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Garnett, Cynthia, , Ms.,**

Mailing Address 1235 Briggs St

City  
Dighton

State  
MA

Zip Code  
02715-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Safeway Inc.

Occupation (for Individual)  
VP Banner/Division HR II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : PR889054515057**

Amount of Each Receipt this Period

75.00

☐ Memo Item

P/R Deduction (\$15.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00